



Docket No. ABGX-2 CIP CPA

Applicants : Michael Gallo et al.

Application No. : 09/375,924 Confirmation No.: 5797

Filed : August 17, 1999

For : GENERATION OF MODIFIED MOLECULES WITH  
INCREASED SERUM HALF-LIVES

Group Art Unit : 1644

Examiner : Marianne N. DiBrino

JUL 12 2004

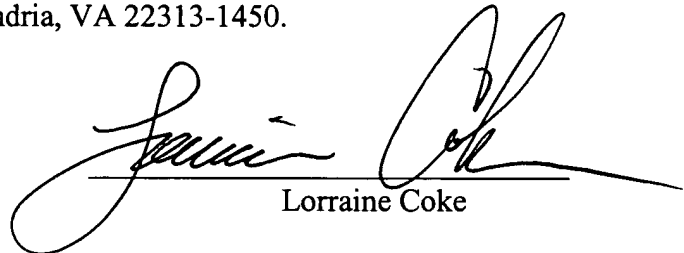
TECH CENTER 1600/2960

EXPRESS MAIL CERTIFICATION

"Express Mail" Number EV386849611US.

Date of Deposit June 29, 2004.

I hereby certify that this paper/fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Honorable Commissioner for Patents, **Mail Stop: Amendment**, P. O. Box 1450, Alexandria, VA 22313-1450.

  
Lorraine Coke

Enclosures: Transmittal Letter (in duplicate)  
Response to March 9, 2004 Office Action  
Check in the Amount of \$110.00 for 1 month Extension Fee  
Return Postcard



07-01-04

1644/1/1  
41

REV. 10/2003

JUL 12 2004

Express Mail No. EV386849611US

For Other Than A Small Entity

PATENTS

Docket No. ABGX-2 CIP CPA

TECH CENTER 1600/2300

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Michael Gallo et al.  
Application No.: 09/375,924 Confirmation No.: 5797  
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For : GENERATION OF MODIFIED MOLECULES WITH  
INCREASED SERUM HALF-LIVES  
Group Art Unit : 1644  
Examiner : Marianne N. DiBrino

Mail Stop: Amendment  
Hon. Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☐ a Preliminary Amendment;  
☒ a Reply to Office Action; ☐ a Supplemental Amendment;  
☐ a substitute Specification; ☐ a Declaration; ☐ a  
Supplemental Declaration; ☐ formal drawings; to be filed in  
the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

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The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	-	* =	X \$	18 = \$
INDEPENDENT CLAIMS	-	** =	X \$	86 = \$
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM			+	\$ 290 = \$

\* If less than 20, insert 20. TOTAL \$ 0.00  
\*\* If less than 3, insert 3.

- [ ] A check in the amount of \$\_\_\_\_\_ in payment of the filing fee is transmitted herewith.
- [X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- [ ] Please charge \$\_\_\_\_\_ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

- [X] The following extension is applicable to the Response filed herewith; [X] \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [ ] \$420.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [ ] \$950.00 extension fee for response within third month pursuant to

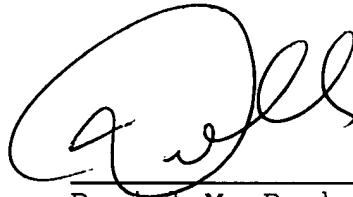
37 C.F.R. § 1.136(a); ☐ \$1480.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136 (a); ☐ \$2010.00 extension fee for response within fifth month pursuant to 37 C.F.R. 1.136(a).

[X] A check in the amount of [X] \$110.00; ☐ \$420.00; ☐ \$950.00; ☐ \$1480.00; ☐ \$2010.00; in payment of the extension fee is transmitted herewith.

[X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge the ☐ \$110.00; ☐ \$420.00; ☐ \$950.00; ☐ \$1480.00; ☐ \$2010.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

29 JUNE 2004



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